



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: Daniel Pihulic
(703) 306-4168 (ph), (703) 872-9326 (fax: non-final response)
Inventors: Daniel J. Magine and Kevin D. Kaschke
Docket No.: DJM0001 Priority Date: None
Appln. No.: 09/862,914 Group Art Unit: 3662
Filing Date: May 22, 2001
Entitled: Underwater Alert System

Daniel J. Magine
2217 West Palatine Road
Inverness, Illinois 60067

October 21, 2002

Letter to the Official Draftsperson
Correction to Drawings – 37 CFR 1.85

Honorable Assistant Commissioner of Patents
Washington, D.C. 20231

Dear Draftsperson:

1. Responsive to the first office action dated July 5, 2002 for the above-identified patent application, the applicants hereby submit the present amendment for review by the official draftsman.
2. The Applicant amended FIGs. 5 and 11 to provide proper correspondence between the RX Amplifier 108 and the Receiver (RX) 128, as referred to in the specification, and as shown in FIGs. 5 and 11. In particular, in FIGs. 5 and 11, the description of the block labeled 108 is changed from “Receiver RX” as shown in yellow to “RX Amplifier” as shown in red and the description of the block labeled 128 is changed from “RX Amplifier” as shown in yellow to “Receiver (RX)” as shown in red.
3. No new matter has been entered into the drawings.

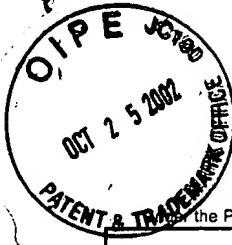
9
Ltr to
Draftsperson
Docket
11/8/02

4. Amended FIGs. 5 and 11 are being filed within the three month shortened statutory period set for reply in the present Office Communication dated July 5, 2002, including a petition for a one month extension of time.

5. Any inquiry related to this response should be communicated to Daniel J. Magine at the address and phone number presently on file with the USPTO.

Respectfully submitted,
Daniel J. Magine, et al.

By: Kevin D. Kaschke
Kevin D. Kaschke
Patent Attorney
Reg. No.: 35,767



PTO/SB92 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

**Assistant Commissioner for Patents
Washington, D.C. 20231**

on October 22, 2002.

Date

Kevin D. Kaschke

Signature

Kevin D. Kaschke

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.
Power of Attorney (1pg), Copy of Assignment (3pgs) postcard (1pg)
Fee Transmittal - 1pg, Fee -check, Transmittal Form (1pg),
Original Fee Transmittal (1pg), Petition for Extension of Time - w/copy 1pg.
Statement under 37 CFR 3.73 (b) (1pg), Amendment /Reply (3pgs.)
Draftsperson Letter w/ amended FIGS. 9 & 11 (4pgs.), This Certificate (1pg)
marked up specification & claims (94pgs)
Clean specification & claims (92pgs.)

Total Pages = 206

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36628

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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|------------------------------------------|-----|------------------------|----------------|
| | | Application Number | 09/862,914 |
| | | Filing Date | May 22, 2001 |
| | | First Named Inventor | Magine, et al. |
| | | Group Art Unit | 3662 |
| | | Examiner Name | D. Pihulic |
| Total Number of Pages in This Submission | 206 | Attorney Docket Number | DJM 0001 |

ENCLOSURES (check all that apply)

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.) | <input checked="" type="checkbox"/> Assignment Papers (copy 3 pgs) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached (check) 1 pg | <input checked="" type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply (3 pgs.) | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request (1 pg.) w/copy | <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 pg.) | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks Statement under 37 CFR 3.73(b) (1 pg.) Certificate of mailing (1 pg), This transmittal (1 pg). Letter to Draftsperson w/ FIGS. (4 pgs) marked up spec & claims (94 pgs) postcard (1 pg) clean spec & claims (92 pgs), orig. Fee Trans (1 pg) | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--------------------------------------------|------------------|
| Firm or Individual name | KEVIN D. KASCHKE |
| Signature | Kevin D. Kaschke |
| Date | Oct 22, 2002 |

CERTIFICATE OF MAILING

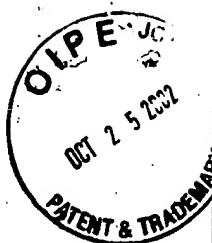
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

10-22-2002

| | |
|-----------------------|------------------|
| Typed or printed name | KEVIN D. KASCHKE |
| Signature | Kevin D. Kaschke |
| Date | Oct. 22, 2002 |

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,117.00)

Complete if Known

| | |
|----------------------|--------------------------|
| Application Number | Unknown |
| Filing Date | Herewith |
| First Named Inventor | Daniel J. Magine, et al. |
| Examiner Name | Unknown |
| Group/Art Unit | Unknown |

Attorney Docket No. DJM0001

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. Payment Enclosed:

 Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|------------------------|----------|
| 101 | 710 | 201 | 355 | Utility filing fee | 355 |
| 106 | 320 | 206 | 160 | Design filing fee | |
| 107 | 490 | 207 | 245 | Plant filing fee | |
| 108 | 710 | 208 | 355 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$ 355.00)

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from Below | Fee Paid |
|--------------|--------------|----------------|----------|
| 78 | -20**= 58 | x 9 | = 522 |
| 7 | -3**= 5 | x 40 | = 200 |

Multiple Dependent

** or number previously paid, if greater; For Reissues, see below

| Large Entity | Fee Code | Fee (\$) | Small Entity | Fee Code | Fee (\$) | Fee Description |
|--------------|----------|----------|--------------|----------|----------|-----------------------------------------------------------|
| 103 | 18 | 203 | 9 | | | Claims in excess of 20 |
| 102 | 80 | 202 | 40 | | | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | | | Multiple dependent claim, if not paid |
| 109 | 80 | 209 | 40 | | | **Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | | | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 722.00)

3. ADDITIONAL FEES

| Large Entity | Fee Code | Fee (\$) | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|----------|----------|--------------|----------|----------|----------------------------------------------------------------------------|----------|
| 105 | 130 | 205 | 65 | | | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | | | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | | | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | | | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | | | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | | | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | | | Extension for reply within first month | |
| 116 | 390 | 216 | 195 | | | Extension for reply within second month | |
| 117 | 890 | 217 | 445 | | | Extension for reply within third month | |
| 118 | 1,390 | 218 | 695 | | | Extension for reply within fourth month | |
| 128 | 1,890 | 228 | 945 | | | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | | | Notice of Appeal | |
| 120 | 310 | 220 | 155 | | | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | | | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | | | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | | | Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 | | | Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 | | | Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 | | | Design issue fee | |
| 144 | 600 | 244 | 300 | | | Plant issue fee | |
| 122 | 130 | 122 | 130 | | | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | | | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | | | Submission of information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | | | Recording each patent assignment per property (times number of properties) | 40.00 |
| 146 | 710 | 246 | 355 | | | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 | | | For each additional invention to be examined (37 CFR § 1.129(b)) | |

Other fee (specify) _____

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

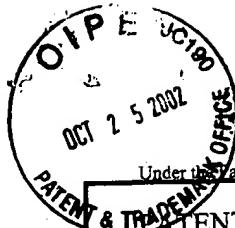
Complete (if applicable)

| | | | | | |
|-------------------|------------------|-----------------------------------|--|-----------|--------------|
| Name (Print/Type) | Daniel J. Magine | Registration No. (Attorney/Agent) | | Telephone | 847-776-9466 |
|-------------------|------------------|-----------------------------------|--|-----------|--------------|

Signature

Date

5-22-01



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Approved for use through 10/31/2002, OMB 0651-0032
U. S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

Application or Docket Number
09/862,914

PATENT APPLICATION FEE DETERMINATION RECORD

| CLAIMS AS FILED - PART I (Column 1) | | | | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|------------------------------------------------------|--------------|--------------|-------------|-----------------|----------------------------|
| FOR | NUMBER FILED | NUMBER EXTRA | | RATE | FEES |
| BASIC FEE (37 CFR 1.16(c)) | | | | | \$ 355 |
| TOTAL CLAIMS (37 CFR 1.16(c)) | 78 | minus 20 = | * 58 | x \$ 9 = | 522 |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 7 | minus 3 = | * 4 | x 40 = | 160 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | 0 | + 0 = | 1,037 |
| | | | | TOTAL | 1,037 |

* If the difference in column 1 is less than zero, enter "0" in column 2

| CLAIMS AS AMENDED - PART II (Column 1) | | | | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|--------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|------------------|----------------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE |
| Total (37 CFR 1.16(c)) | * 182 | Minus | ** 78 | x \$ 9 = | 936 |
| Independent (37 CFR 1.16(b)) | * 16 | Minus | *** 8* | x 42 = | 336 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | + 0 = | 0 |
| | | | | TOTAL ADDIT. FEE | 1,272 |

| (Column 1) | | | | (Column 2) | (Column 3) | ADDITIONAL FEE |
|--------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|------------------|------------------------|----------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | |
| Total (37 CFR 1.16(c)) | * | Minus | ** | x \$ _____ = | | |
| Independent (37 CFR 1.16(b)) | * | Minus | *** | x _____ = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | + _____ = | | |
| | | | | TOTAL ADDIT. FEE | | |

| (Column 1) | | | | (Column 2) | (Column 3) | ADDITIONAL FEE |
|--------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|------------------|------------------|------------------------|----------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | |
| Total (37 CFR 1.16(c)) | * | Minus | ** | x \$ _____ = | | |
| Independent (37 CFR 1.16(b)) | * | Minus | *** | x _____ = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | + _____ = | | |
| | | | | TOTAL ADDIT. FEE | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Note: Applicant mistakenly paid for 1 extra indep. claim on filing.
See error in Fee Trans. that is attached.

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